



ASC Utilization Report  
State Form 49933 (R3/6-05)  
Indiana State Department of Health  
Acute Care

Status: Finalized

I. Center Identification

Organization Name: SAINT CHARLES SURGICAL PAVILION

Street Address: 1900 Saint Charles Street

City: Jasper

County: Indiana

Administrator Name: Joseph McVicker

Administrator Email: scsp@norrisblessinger.com

ASC Web Address:

Fiscal Year: 2021

Accredited:  Yes  No

Name of Accrediting Body: Joint Commission

Deemed Status:  Yes  No

Corporate Tax Status:  For Profit  Non Profit

II. Identification of Surgical Resources

Number of operating rooms	1
Number of procedure rooms	0

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures

Persons Served in twelve-month period	1509	2474
<b>B. Ten Most Frequent Surgical Procedures Performed</b>		
<b>CPT Code</b>	<b>Total Procedures</b>	
62323	265	
64483	216	
64721	128	
27093	100	
26055	54	
G0260	53	
62321	50	
23430	41	
63030	40	
23412	40	

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	9
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